EXHIBIT 1

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FORENSIC PSYCHOLOGICAL EXAMINATION

CASE NAME:

Aurora

EXAMINEE:

Aurora (Pseudonym)

DATE OF BIRTH:

DATES OF EXAMINATION:

August 17-19, 2014

DATE OF REPORT:

November 21, 2014

REASON FOR REFERRAL

Carol Hepburn, Attorney at Law, has requested that a forensic psychological examination be conducted on her client, Aurora. She and her sister, Alice, are child sexual abuse survivors whose images of having been sexually abused have been disseminated onto the Internet. Their images are being viewed by individuals and further distributed to others.

Through the National Center for Missing and Exploited Children (NCMEC), Aurora and Alice are aware that these images of their abuse and degradation as children are being distributed and viewed by a number of individuals. Each of them, through their attorney, represent that each of these crimes create a continuing victimization inflicted upon them by these adult offenders, the effects of which are ongoing psychological damages. Aurora and her sister, Alice, are seeking restitution from those who have been arrested and convicted of the possession and/or distribution of images involving sexual abuse in which they were victims.

Hence, this evaluation was conducted in order to address the manner in which, if any, the knowledge of the distribution and possession of those images by others has injured, or is injuring, Aurora psychologically. She and her sister represent through their attorney that they are being exposed to the effects of the continuing existence of these images on the Internet for the indefinite future.

This evaluation will address the degree to which Aurora has been psychologically or psychosocially injured by the impact of the knowledge of the downloaders of their images. If so, it will further address whether those injuries are qualitatively distinct from the injuries sustained by their father and others who originally abused her.

BACKGROUND INFORMATION

International law enforcement agencies coordinated in a joint venture named "Operation Hamlet" to arrest at least twenty members of "The Club." Their birthfather was living with the victims and other family members when their house was raided. He was arrested in January Authorities discovered that he had 40 CDs containing approximately one million child pornography-related images. The August indictment indicates that the members would actually order particular types of sexual activity with a child under the abusive control of other members.

The Superseding Indictment filed 10/ charged 20 men with violation of 18 U.S.C. Para. 2251 (a) and (d) - Sexual Exploitation of Children, Conspiracy to Sexually Exploit Children, and Receiving and Distributing Material Depicting the Sexual Exploitation of Children. In essence, the indictment read that the individuals, chief of whom was their father, conspired with one another to "... persuade, induce, entice and coerce a minor to engage in, and assist others in engaging in sexually explicit conduct for the purpose of producing visual images of such conduct. Furthermore, they had reason to know such depictions would be transported in interstate and foreign commerce."

It went on to state that the defendants, for reasons including but not limited to their own sexual gratification, coerced minors over whom they had control, custody, and access to engage in sexually explicit conduct, from which visual depictions were created and distributed.

These perpetrators traded images of their sexual crimes over the Internet. They discussed production and distribution of the produced images during sessions on the Internet. They sometimes traveled to the location of minors who were already being used by Club members in a particular locale, in order to engage in sexual conduct to produce additional images, in addition for purposes of sexual gratification.

Their birth father, , was one of the primary organizers of the group and was the primary sexual abuser of Aurora and Alice, although other members of "The Club" were involved, as well. and others pleaded guilty of those charges. He agreed to a 360-month sentence that he is now serving.

PROCEDURES USED

(NOTE: This database, in addition to psychological testing, collateral contacts, and available records, will provide the substance for the findings, summary and conclusions contained in this report. Quotations are accurate, but not necessarily verbatim, representations of the communications provided by persons interviewed during this evaluation.

Prior to commencing this forensic psychological examination, I oriented Aurora about the nature of this evaluation and the purposes for which it is being conducted. She then read and signed the <u>Disclosure Statement: Forensic Psychological Assessment</u> after being given the opportunity to ask any questions she might have regarding its contents.)

The following procedures were used in conducting this evaluation:

Diagnostic interview with Aurora on 8/18/2014: 7.0 hours

Collateral interview with Alice on 8/19/2014: 6.75 hours

Collateral interview with (sister) on 8/17/2014: 3.9 hours

Collateral interview with (mother) on 8/17/2014: 1.25 hours

Review of records, including the following:

School District records: 96 pp.

Medical Clinic: 6 pp.

Government Response to Defendants Sentencing Objections US v dated

3 : 3 pp.

Indictment: USA v. , et al, dated 8 : 16 pp.

Memorandum of Plea Agreement, Pursuant to Rule 11(e) of the FRCP, dated 3/19 pp.

on-line article dated 8.

Community College records: 35 pp.

: 57 pp.

U.S. District Court

: Case #

: USA V

, dated 8

: 4 pp.

U.S. District Court.

: Case

; USA v

: Government's Response to Defendant

and

s Sentencing

Objections, dated 3

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U.S. District Court

: Live System: Criminal Docket for Case

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; 18 pp.

Superseding Indictment USA v.

a.k.a. "

': 19 pp.

Psychometric testing and/or questionnaires, including the following:

Detailed Assessment of Posttraumatic Stress (DAPS)

Millon Clinical Multiaxial Inventory-III (MCMI-III)

Minnesota Multiphasic Personality Inventory-2 (MMPI-2)

Posttraumatic Screening and Diagnostic Survey PSDS)

Trauma Symptom Inventory-II (TSI-2)

INTERVIEW BEHAVIOR AND OBSERVATIONS

The 7.0-hour diagnostic interview was conducted in a private room at Aurora's family home over a three-day period spanning 8/17-8/19/2014. The eye contact of this young Caucasian woman was good. She was dressed casually and modestly. She has two tattoos; the design of each was very intentional. One tattoo is a cross, designed to represent her faith in God at the time. She explained, "My sisters and I wanted one when I turned 18 years old. We agreed that God is our rock. He has been there for us. And, we have a Father in Heaven. The other is the phrase, "Fatherless Generation," which she had inked on her, as did her sister, Alice, both of whom were sexually abused by their birthfather.

Aurora stated she was not taking any prescribed medication at the time of the interview. She indicated that she does smoke marijuana approximately 2-3 times weekly, mainly for purposes of helping reduce her anxiety and/or to assist with sleep. The last she had was approximately two days before the interview, she said.

Aurora's attitude was very cooperative. She remained highly engaged throughout the interview. There was no indication of guardedness or defensiveness. Her psychomotor activity was within normal limits, as she sat for extended periods of time in an interview that was for her highly emotional. There was no obvious indication of hyperactivity; she was self-conscious about being somewhat "squirmy" and fidgety during the interview, though it was not noticeably so.

Reflecting her self-consciousness and previous difficulty speaking about these matters, she prefaced the interview by saying, "I have a hard time getting the words to explain myself." Her speech with regard to rate, rhythm, and volume was within normal limits and unimpaired. Her receptive and expressive language function is well within normal limits.

Aurora's facial expressions were most consistent with sadness and anger. Her mood during the interview was consistent with sadness (including tearfulness), anxiety, and anger. Her affect was appropriate to the content of the subject matter being discussed, although she volunteered that she has invested considerable effort in avoiding thoughts and feelings about the abuse, and about those who are arrested with her or her sister's images. Aurora states that she is "still [is] on an emotional roller coaster." She experiences significant mood fluctuations." I feel like others don't get it. I can't flip it like a switch."

This young woman, highly practiced in coping mechanisms of avoidance, stated that she felt very

anxious on a daily basis, and this day was no exception for her. She added, "I am warning you; I have been an emotional wreck, recently. I used to talk about it a lot, and used to write about how I felt — a lot of emotion. So talking about it is going to bring a lot up, and I might cry. I have always battled depression. There is 'sad' and there is 'depressed,' and there is a fine line between the two."

She was well oriented with regard to time, person, place, and situation. She understood the purpose for the evaluation. Her memory, both recent and remote, appears to fall with normal limits. However, Aurora also states that she has only partial access to some of the memories of her abuse experiences, and she is troubled that she can't access some of them. Other than abuse-related experiences, she appears to generally have access for meaningful events. She also says she does struggle with distractibility, focus, and concentration.

Aurora's ability to reason and abstract is intact. Her judgment is essentially unimpaired. Her insight into the nature of her problems is fundamentally underdeveloped and unexplored. Hence the impact of her past tends to drive her choices, rather be available for her to harness from a self-aware, mindful stance. In that context, her unaddressed and unresolved issues substantially impinge on her life.

Although not assessed in this evaluation, Aurora's intellectual functioning falls within the average range. Her thought processes are intact and unimpaired. There is no indication of circumstantial or tangential thinking. She does not display indications of flight of ideas or loose association. Her thoughts are reasonable, coherent, and understandable.

PSYCHOSOCIAL HISTORY:

Developmental history:

Aurora was born on in . Her birthmother did not use drugs or alcohol during pregnancy. There were no complications during the pregnancy or the delivery. Aurora's achieved all of her developmental milestones within expected timeframes. However, she (as well as her sister Alice) continued to wet the bed until about 12 years of age.

Family of origin:

The birthparents of Aurora and Alice are and , who were married in attended chiropractic school in He was described as having appeared be a highly involved, very active, good father – someone with whom Aurora and her siblings bonded. Her mother recalls that she and her former husband got along "fairly well." Their older daughter, described him as creative, very funny, and artistic, but also very hippy-like and free spirited. He was a great cook who taught the children to cook from scratch. Aurora remembers him having "fluffy hair and [that] he was carefree." He was an "amazing guy who knew so much and could teach you so much.

He was neither verbally nor physically abusive. Years into the marriage, struggled businesswise and began drinking more. He was not a financially successful individual.

Their mother, came from a very dysfunctional family of origin and was an untreated survivor of abuse. She lacked self-confidence, was very submissive, and had not really learned to become someone who thought for herself or learned to ask self-connecting questions. She dependently sought direction from others, for the most part. She was not introspective and appeared to have a well-developed capacity to "not think." She was, as one daughter described, "110% made to be a mom."

Aurora describes their mother as someone who was good-hearted, naïve, and submissive. She

didn't let things get to her. She never got angry, and was "always smiling and kind." She is compliant and generally viewed as being "without a clue" with regard to how to deal with life's challenges and with people.

and had four children. was born in and apparently has displayed over the years symptoms consistent with ADHD. As a child he could be very aggressive, according to his siblings. was born in a Aurora was born in and Alice in a Aurora says she generally has tended to be the pleaser and more reserved, whereas Alice was much more vocal and independent.

Their family lived in and then moved to in where Alice was born. worked with some different chiropractors, before moving to in where he set up a chiropractic practice. They settled down there and have not moved from there.

began to drink more heavily. In he was in a motor vehicle accident that led to other changes in his behavior and his spending more time at home. At the time, Alice was about three years old and Aurora was about four years old at the time. Looking back, Aurora has expressed the wish that he would have died at the time of the accident, given what came later.

was bedridden and had considerable time on his hands. Although she For a while believes this is the point where he became involved with pornography. doesn't know for sure. purchased a camera and began taking pictures "all the time." In fact, he After his injury, managed to position himself into becoming their elementary school photographer. He had children recalls one time when she was ten years old, house very frequently. coming over to walking in on him with a 5-6 year old girl in the room. She says that he had the camera on a timer, and he was sitting down, with the little girl sitting between his legs. That was confusing to . She admits that stirred feelings of jealousy, such as she had felt for years as she witnessed the special attention he had showered on her sisters, as well as other girls. There were occasional times, when she told her mother who, against her basic nature, would confront him in some respect to no avail.

In time, recalls that he got "worse," not knowing how bad "worse" actually was. He would play with neighbor children in the next-door pool, as if he was a big child playing with them.

Her sister Alice recalls him being manipulative and self-centered, in addition to being very intelligent and ingenious. She describes him as living a double-life; he was someone who did "cool things and really, really bad things."

's family of origin was located in Their mother frequently traveled back to where she cared for her ailing parents for a number of years. In the late in succession, her father, her mother's significant other (, and finally her mother developed terminal illnesses.

When the children were young, they accompanied her. However, as they got older, they began to stay more with . Aurora remembers that often took her and Alice to his office, where they would "hang out." She recalls that might have begun as early as when she was two or three years old.

Looking back, the children have a recollection that their mother was not there a lot for them. Aurora reflects, "It was so difficult. I felt she had to always leave. She would go away for the weekend. She took us there a lot of the times when we were young. Dad rarely went. She said to call when I needed her, and I always called her. With mom, it was one thing after another."

Nonetheless, Aurora remembers her mother as always a safe person for her. Reflecting back, she says, "I don't know if I ever dropped hints to her (about their father's secret behavior). It was such a hard time for us as kids. (Prior to the onset of the abuse) I had looked at mom and dad, and thought they were the most amazing couple. We were a cohesive family."

's mother was the last of the ailing parents who died in when Aurora was about six years old and Alice was about 4-5 years old. Alice remembers her parents fighting frequently by that time. When their maternal grandmother died, the girls recall that their mother grieved heavily and was preoccupied with her loss. She also became swept up in some legal difficulties their uncle was having at the time.

Their mother remembers Aurora as a much quieter and more compliant child, whereas she says that Alice was a "strong, stubborn" child. She says that she remembers her dealing with anger and defiance to :

Childhood sexual abuse ages est. 4 - 8 years old (

Aurora says that sometimes would physically abuse them with belts. This would be on their "bare bottom" up to the time he was gone, which for Aurora was eight and Alice it was seven years of age.

However, far worse was the sexual abuse to which he subjected them. Her sister Alice says she recalls the onset of sexual abuse to have begun when she was very young, estimating the grooming and subsequent violations beginning when she was about four years old, if not slightly earlier. She says that after his motor vehicle accident () he purchased a camera, props like small pillars upon which one might rest one's hands when posing, and a variety of backdrop scenes. He stored the material in a closet in a spare room of the house.

started doing "photo shoots" of them after preschool or later at night. Her sister Alice estimates that the abuse extended from to January , taking place multiple nights and days, causing disrupted sleep in multiple respects. He would dress them in bathing suits, wrestle with them, and do a number of photo shoots with them. recalls that he was constantly obsessed with privately taking pictures of her younger sisters, to the degree to which she felt jealous – not having any idea about the abuse that was going on.

was obsessed with his computer and tightly controlled access to it. recalls seeing pictures of girls 7-8 years old on the computer once, and she questioned him about that. He dismissed her query as it being "what they do in Europe."

Aurora says that her first memory of her sexual abuse is "super dark." She said that she was in room on his bed. She remembers a camera, but has blocked out what happened. She does recall that they were both naked. She was very young, possibly four years old, but said that she did not remember what happened.

Aurora recalls another time at the age of four when she was sitting at his computer desk on his lap. He was touching her in her crotch and rubbing her. She said she had clothing on, but she could not get away from him. It was not like she was tied down, but he had a firm grip. He was clothed and no one was home at the time.

Aurora states that he did make her masturbate. She says she doesn't recall if there were any toys, but there were props she was to use. She adds, "I don't know what the things were or did not know what it (the masturbation) was." She says he scripted her to make certain facial expressions or particular noises.

Rather early on, brought other men from out of town to engage in sexual activity with them as well. Aurora says that she remembers one of his confederates, would come over to the office from out of town. Another one, she recalls seeing less frequently, but says that he was "business all the time, and it was bad every time." She says that, in some respects, did more to her than did. His contacts felt especially hurtful, she says.

, and all fondled her chest, she says. As she continued to allow herself to think about the past, she says that she has been raped, but that she had tried over the years to block the experiences out of her memory. also involved his daughter, who told her and Alice that what they were doing was normal. She says that his daughter did "stuff" to her. The girl helped to pose them for certain pictures, and would calm her if she started becoming upset. She says, "There were so many other times that it is hard to think about. It."

Aurora and Alice wet the bed during the entire time of the abuse, and several years beyond. Their would get angry with them, awakening them in the middle of the night by touching their genitals. The entire experience, both the wetting and the touching, were shaming, embarrassing experiences for the girls. Alice states, "Aurora and I were usually together. Because of the abuse, we would wet the bed, and he would come in and I would wake up to camera flashes. And I was half asleep, and he would change us and abuse us. It was terrifying, and it happened most nights, I think." She says that she was around six years of age, plus or minus a year or two. She added that she had uneasy sleep during the years of her abuse.

remembers that his "photo friends" began visiting from other places around Aurora was six years old, and Alice was five years old at the time. Alice reports that the "photo shoots" would take place at their house, in the office, at the house of" or in some other settings. She recalls that took baths with her and washed her. She says that he took pictures of her in the bathtub. While he was always present, there were other people sometimes involved, including or "and did fondle her breasts and vagina."

He would script photo shoots for them, telling them what to do, what to wear, how to pose, and how to behave. He would say, "Look back," or "Wrap this around you" or "Take this off", or "Put this on." He made the two dress up in bathing suits and wrestle together. Once, on returning from he brought back coconut shell bras for Alice and Aurora, ages 3-4 years old, respectively. Aurora reports that their father also made her do sexual actions with her stuffed animals on multiple occasions, though she did not get more specific. She says there was "always" an animal.

Invariably, their father, they saw, would tell them what to do: posing, positioning, with the backdrop made of tapestry, or a backdrop he had painted. They would be clothed, unclothed, wearing a theme-related piece of clothing like a bathing suit, coconut bras, or hula skirts. He would also bring props from his office like a stethoscope. He would either video or take pictures.

Aurora's memory is that many of the contacts with were just by herself, rather than with her sister. There were times he would be in the picture or other times not. There were times when he made her touch his genitals, and times when he touched hers, she says. Aurora says, "I just remember him naked and it makes me feel sick."

Her sister, Alice, remembers photo shoots when would make her and Aurora stand back to back, in the nude, next to one another. She says there were times when he separated the two of them, taking one or the other into a separate location. Alice reports that and would touch her and insert a finger in her vagina while she sat in a rocking chair.

Alice also describes him taking flash photographs while she was made to pose by lying down on a floral couch with her diaper off. Alice said she remembered that would orchestrate the photo shoots, including having them licking ice cream or lollipops. She has a recollection, she says, of her and Aurora being made to perform oral sex or touch one another in the area of their private parts.

Alice states that she has memories of her, or both of them, sometimes screaming. She also has the belief that she was trying to resist in some way when he tried to make her do acts she did not want to do. She generally tended to be much more vocal in her anger and resistant or defiant to their father, in general. She says that she doesn't recall if she ever hit or his friends, but says, "I am pretty sure that I kicked and screamed." She adds, "I think I thought I would rather have pictures made than be touched. I didn't want to be touched. I don't know if (Aurora and any of the abusers) ever did have sex, or if they did, who it was with."

Alice, Aurora, and say they remember regular trips to and 's involvement with his friend and fellow pedophile, who had a daughter older than Aurora and Alice who was further along in being co-opted as a manipulated confederate in the abuse and its "normalization."

and her sisters, to a lesser degree, remember a time when their father met with the children, and with and a few other men on the beach. She says her sisters were very young at the time, possibly as young as 2-3 years of age, though they might have been slightly older. All the children were nude. Then they went to shouse where was separated from her sisters. She recalls that trip as very dark and frightening, though she, herself, was not a direct victim. She remembers the girls were locked in the room, and they were crying. She remembers that it was a watershed moment for her in realizing how much her younger sisters were being harmed, rather than be treated as favorites.

Aurora states that she vividly remembers as well. She also recalls him locking her up alone and keeping her away from Alice. She says he had picked her out over Alice or to abuse. Looking back at one of those times, Aurora says, "I am very dependent on my sisters, and I can't see myself voluntarily being away from them in that kind of situation." Speaking about , she says, "There's so much I want to say, but it is random, and it keeps rushing back."

Aurora said that regularly told them together, or her individually, that this was their secret. Upon reflection, she says, "I can't believe that I have not mentioned that before. He made me feel accepted, special, and I was really young when mom's mom passed. All I knew was my dad. The parents are the first people you trust in your life. I never talked with friends. Sometimes I felt weird around other . She also wondered about whether other children's "liked" her friends in the same way that related to them, because of her own experience with

Alice says she doesn't specifically recall if videos were taken, though a camera was commonplace in the situations. She says that he would always tell her to keep these acts as their own "secret." She reports him saying, "Don't repeat this." He referred to the times of abuse as "playtime" or "fun time," using it in context, "Our little play time; our little fun time."

Educational history: K – 2nd Grade (

Aurora was already a victim of chronic sexual abuse before beginning school, creating a confounding variable with regard to understanding those factors contributing to her difficulties in school. She reports that school has been a struggle her entire life. For example, she reports chronic problems with daydreaming that interfered with her ability to focus. This contributed to her difficulty in learning new material, adding further to her negative self-image and difficulty developing healthy

study habits. This has been compounded by having problems with random thoughts and difficulty focusing and concentrating.

She explained, "I always have things going through my mind – random things. I would sit in class and go off on a particular word. I never cared too much for school, and didn't ask what I missed.

Aurora started kindergarten in and repeated it in She attended first grade in Aurora was eight years old, attending the second grade) when was arrested on January resulting in the end of her world as she had come to know it.

Medical history prior to

Aurora had generally good health until she was older, when she developed the gradual onset of sinus problems, although she began dealing with some allergies as early as five.

Arrest and its repercussions: et seq

Their mother remembers that a police officer once came over, stating that had been taking photos of students and putting them on CDs. The officer had said that a parent expressed concern about this and relayed that to the and his wife. She says she did not give it any thought, once dismissed the concern. Time passed until early

On January , fifteen police swarmed into their home with a search warrant. and all of their lives changed forever. At that time Alice was seven years old, Aurora was eight, was 12 years of age, and was 15 years old. Neither Aurora nor Alice had reported the abuse, so arrest was not something they had been psychologically preparing for in advance, resulting in a willingness to finally disclose. They were very shocked and confused.

Thinking back on that time, Alice says, "The world became more chaotic. Everything was torn up." Alice recalls that there were multiple harassing messages left on the phone, as well, siding with who was very popular in the community. The girls were initially accused of falsifying allegations and some apparently said that the girls were the ones who actually were victimizing to Alice says that, although their mother did not share these things with her, they had a sense of what was going on, as it was hard to hide it. She says their mother was "shattered."

on the other hand, said that the "worst night for my family was the happiest night in my life. My mom was crying, and I was feeling completely relieved." Nonetheless, thinking back at that time, she says, "arrest was so notorious, it was hard going to school. The kids were ruthless. There were countless articles about a horrible time. It was hard living in a small town. Got bad looks from others; we were treated like we had leprosy. Both Alice and Aurora got bullied for different reasons."

There were multiple repercussions upon the revelations. There was a tremendous amount of media coverage that ensued after his arrest. The family had people swarming around the house, and the media followed them around. The girls' faces had to be covered up during the extreme media hype, wearing masks over their faces when they were walking to and from their home. At a very devastating moment in their lives, all family members are unanimous in attesting to that becoming a horrific time in their lives, even though for Alice and Aurora it ended their sexual victimization. Their brother, was beaten up on one occasion. Concurrently, he was dealing with the abrupt deconstruction of hero. He later became a problem drinker. Their mother said about those times, "You could never get away from it." Alice recalls being "scared" when he was arrested.

Aurora recalls, "It was a really random night when everything was exposed. I was in my house, when I was taken to the back of the house and asked questions. I was so confused. I could not talk." She

recalls looking at the news and saw her house on TV. Looking back, Aurora says that she could not even go outside, where her neighbors, journalists, and cameras were congregated. The family found it necessary to relocate from their home.

Aurora reports that she was scared and so confused that she could not go out and play. She remembers it as "overwhelming. I remember we stayed at my grandma's a lot. No one knew where they lived, and it was in a gated community. It was crazy. People were really on us with the story. It was over the top. People would hide in the bushes and around the corner of the house."

Financially, the family was also devastated. remembers they had to "mooch" off of their friends, because they had no funds. eventually escaped by going into the military. says she sought respite in their church. She also thought church and youth group involvement might protect her sisters from being worse casualties.

Aurora says, "Mom ignored dealing with stuff. Mom is so empathetic. But it is hard that she is so passive and hasn't wanted to deal with it. She is not a pillar. stepped into that void. She definitely played the mom role. I was not afraid of mom, I was afraid of Mom shut down, it may have been her breaking point. She stepped out of the role of being a mom. But she worked so hard to keep a roof over our head."

remembers comforting Aurora who did not like looking physically like other family members and she didn't like her blue eyes. remembers both sisters blaming themselves for what happened, taking on the shame for themselves. She also says they rejected themselves. Consistent with her previous attitude, her mother recalls that Alice was angry at the media frenzy.

Complicating their lives was the strong support of by his mother, their Both and grandmother were in blatant denial about his criminal activity, placing further pressure on the girls, in particular. During the months prior to incarceration, she said that their grandmother sought to facilitate contact with blinded to the implications of the charges involving her granddaughters. Compounding their own guilt and shame, their grandmother fueled Alice and Aurora's guilt for having split up the family and done something hurtful to their mother.

Reflecting back on the pressures with which she was dealing, Aurora says, "It's as if you are the one who is a bad kid. And then my grandmother told me I was wrong. She was the one who was poisoning my mind. She wasn't letting me accept the truth. As a kid, I felt she was on my side. I thought that my grandmother was the only one who understood me. I can't believe I fell for that. I can't go back and express those feelings. I have never expressed how I felt. Also berated me, as well. I wish I could have expressed myself then."

Although Alice put on a tough exterior, and often expressed her pain and hurtful feelings with anger, she says that she was deeply hurt that her grandmother did not like her. Looking back, she says she felt deep pain and vulnerability. Their mother was unable to set a boundary with her grandfather who attempted to step in and dominate the family.

Aurora says that their died in Thinking of her, she says, "She was not a bad person, but she was lying to herself and to us, and could not deal this. When she passed, was in the army and could not be with her in the hospital. I was numb that whole year. It was a dead feeling. Our grandmother had been sick the whole year. Maybe I thought if I turned off my emotions, it would not hurt me. It was hard, because my sisters called me "Grandma's girl," so I didn't want to show emotion when she passed."

Aurora recalls that her nightmares began after the public nature of arrest and the exposure to the media of so much of their once private, shameful, and painful world. She says, "The nightmares came after. I was afraid of losing my family and never seeing them. Other nightmares were of me being out in the darkness and afraid that something was waiting for me; they were especially weird when I was sick. Sometimes I woke up crying."

Another repercussion of arrest was the removal of , the dominating presence in the home. Their mother was unable to fill the void with her history of dependent, indecisive, learned helplessness. She was completely overwhelmed and unprepared to take over the reins of the family. Filling the vacuum, became the surrogate parent, or parentified child, to her younger sisters and to their mother. Ultimately, however, the fractured and devastated family members began to slowly, but in a very broken and damaged way, survive in whatever ways each stumbled upon to do so.

Aurora says that she barely remembers the police interview; "I kind of remember them showing me pictures, but I don't recall of what. I remember having to go to court. I was twelve. The year graduated. I testified against I remember a great (victim advocate) counselor. She had me use soothing rocks. All eyes were on me. was looking at me. It was so horrible, as if it was not real, but a bad nightmare. I don't remember what I was asked. was such a main character. I didn't have to testify against "(Neither Aurora nor Alice had to testify at the trial against however.)

Aurora says that one of the difficult surprises for her was the discovery that and his confederates had sexually abused multiple children who had been the victims of "The Club," even in the area, as well as other places. It was very difficult for her to absorb and process the scope and number of his other victims, with one as young as one year old. She slowly came to integrate the understanding that had many victims besides her and Alice. This was yet one more incomprehensible part of their reality that confronted Aurora and Alice, eight and seven year old children at the time.

The knowledge of the distribution of images to others was known at the time of his arrest, but the implications were essentially shielded from the girls, and the implications of images being available to access and download on the web *in perpetuity* was not something they could meaningfully process at the time.

Therapy

Alice and Aurora were referred to therapy. They initially did not want to go. Her mother recalled that they were both frightened -- an emotion that their mother says has been pervasive and long lasting.

Aurora met with Ph.D., shortly after the discovery of her victimization. Her first session was held on 2 She recalls that she liked Ms. but still found it extremely difficult to be involved in therapy, because "I so badly didn't want to talk about it. She (Ms.) needed me to vent and I never did, and I shut down. I made it difficult."

Dr. diagnosed Aurora with Sexual Abuse of a Child and Mood Disorder Not Otherwise Specified. Dr. described Aurora in a manner consistent with someone in a trauma bond with the perpetrator, ; she did not want him incarcerated in those early weeks. She observed symptoms that included anger, anxiety, avoidance, denial, depression, dissociation, emotional numbing, guilt, hyperarousal, and irritability. She noted that Aurora was very distressed over the high profile case that drew media and neighborhood attention.

One year later, a treatment update in January noted that Aurora still was dealing with significant denial and was extremely avoidant of her abuse, adding, "Still has not acknowledged even a minimum amount of what happened to her." Then, in April , Dr. wrote that Aurora was withdrawn with a diminished sense of self...the whole school knew. Family had to move. Child is ashamed and very traumatized... Child shows good response to treatment. However, the crime was especially traumatizing... Remains shameful and guilty and really misses in spite of molestation." Dr. also wrote that Aurora was very confused about the loss of her close but pathological relationship with . Therapy was terminated because she reached the maximum amount of authorized sessions.

Family dynamics (

Aurora (tearfully) says that when she turned 18 years old, their father communicated with her, telling her that he did not think he had done anything wrong. Reflecting on that, she says, "He doesn't see it!" Her entire victimization and his lack of remorse elicit intense reactions of anger and emotional pain, represented through her agitation and tears. She says, "That makes me so upset. I go crazy! I feel like I could punch someone. I know he knows! I am so angry."

Through the onslaught of media attention, paternal family harassment, the bond of family, and the commonality they experienced as survivors, says they have become a "very tight tribe" – though sometimes, possibly overly wary of outsiders – she says.

and became the surrogate protectors, filling a role that their father had betrayed and from which he disqualified himself, and a role that their mother was unable to fill. This was costly to's relationship with her younger sisters. She said it was a roller coaster between the times was years old. Now their relationships are improving, and the bond has survived through all the challenges. , too, has done work on her co-dependent involvement with their mother and the girls, and has been working at individuating and detaching from the dysfunctional, enmeshed dynamics that had previously existed.

Personality Development

Aurora describes herself as someone who has been more retiring and reserved, keeping matters to herself. She views herself as someone who was much more likely to back off, step away, or go along and "not make waves." She observes about herself that she has always been looking for acceptance. For those reasons, she reports that her personality was such that she has allowed others to "walk over" her and take advantage of her over the years. She observes about herself that she has tended to be a lot more dramatic, though she sees herself more recently "being a lot better" with respect to that.

Aurora says, "My whole life I felt the need to be accepted. I wanted people to like me, and to think I am cool, but I didn't like attention on me. I did not feel like I ever was accepted. I look back and didn't see what I had. I had pulled away from friends, and I was trying to find a friend, while others had tons of friends, and I thought they were cooler than me. They saw that depression in me, I think."

In high school, she says that she would pick people who were "easy" to make friends with, but they were not good influences to have as friends. She did have a hard time speaking up for herself, until she had a dominating, forthright, opinionated female friend in high school who actually helped her learn to speak up more than she had before.

Educational and social history: 2nd grade to present (

Referring to her experience in elementary school and beyond, Aurora says, "Friends didn't talk to me, or that was my feeling, anyway. I remember going back to school. Some looked at me weird. I almost don't remember being in school that year. I remember my RN well and I always hung out with her. She and her sister tried to negotiate through school in a seemingly impossible situation, given the local notoriety of the case and the family.

Aurora advanced from her elementary school at the end of sixth grade (and entered the seventh grade at the intermediate (middle) school in fall . Her paternal grandmother died during the second half of that year. This was another difficult, co-occurring development while she was seeking to survive in school. Although failing math, she managed a cumulative GPA of 2.29. Her grades slipped further during her eighth grade year (), eking out a 2.074 cumulative GPA in June , including a "D" in PE.

In fall Aurora became a freshman at the local high school. In high school, she represents that she thought about the entire time. Her academic performance during her ninth grade year was variable, with a slide to a GPA of 1.8 the second semester. Her low point in school occurred during the summer when she had a GPA of 0.00. Looking back, she says, "My junior year -- I didn't care. I was fatalistic. What is the point? I did not pretend to feel happy. I was very depressed. I didn't know who I was. Everybody told me to get over it, including a lot of church friends. My friends thought I should get on with it." Aurora says that some friends would ask her where was. She answered that he was dead.

Looking back, she says, "That was my hardest year. I was 15 years old. I was really depressed the entire year. That is when it was okay for kids my age to explore a sense of fashion, to express feelings, to love poetry, to write how you feel. Some friends had some history similar to mine. I remember I was such an angry kid. There was a canal near my school, and I used to debate whether life was worth living. I carved and cut on myself. I carved words like "love," "fear," and stuff I felt. I used a tack and safety pin. Never used a razor." For a time, Aurora says that she expressed her confused and intense feelings in that manner.

Her mother apparently had counseled her to cover up her marks on her arms. She says that she wore multiple Band-Aids on her arms, and said that her mother told her to wear a long sleeved shirt. However, when figured this out, he called a family meeting. Aurora said, "We all think is going to be so mad, and he is not like that. He is most understanding and sensitive, and we put him in an unfair place."

Reflecting back on that important meeting, she says asked, "Why do you feel the need to write the word "love?" And at the root of it, we talked about . I don't know what happened, but that brought it out in the open, and I felt ten times better, and it brought us together."

Particularly that junior year (, Aurora said she felt overwhelmed, and walked off campus. She says that she skipped school primarily during her junior year, until school officials told her that they were going to have to hold her back, and not let her graduate.

That did get her attention, to the point that during her senior year, though she stayed to herself, she says she did much better in her attendance. Academic records do reflect that she slowly started pulling up her performance with a steady increase in cumulative GPAs from 2.33 to a final term, senior year (spring) of 3.4. During that year, Aurora was starting to regain her footing, says her older sister: "she was thriving like a lotus blooming." She graduated from high school in June

Aurora attended fall of: , spring of , and spring of terms at College, of the Community College District. She withdrew from five classes in those three terms, failed seven courses, and had one D and one B (Child Growth and Development). This performance resulted in a cumulative GPA of 0.522. An analysis of the scoring sheets that reflect elements contributing to her grades, such as tests, assignments, bonus opportunities, and attendance reveals some low scores, but also contain many entries of "0." There were exams she did not apparently take, bonus assignments she did not attempt or turn in, and no credit for regular attendance. This data pertained to her Dance classes. While further analysis is indicated as to contributing factors to her poor performance, there is a significant component that is related to non-cognitive factors, such as psychological, emotional and motivational factors.

Alcohol and drug abuse history

Presently, Aurora says that she smokes marijuana 2-3 times weekly, finding it usually relaxing and soothing, although sometimes it has the effect of making her worse. She avoids other street drugs. Alcohol has the effect of making her sick, she says, though she says that she had consumed some vodka at school. It was a negative experience. She does smoke cigarettes that help her relax.

Relationship with males

Aurora has had one boyfriend prior to her current one with whom she has been since she was a 15-year old freshman. She says that her boyfriend has been very patient and understanding with her. She explained that when they had some sexual involvement, she began crying. She said that she had instantly felt violated in the context of the sexual activity, and broke down crying. Though she said she loves him, "it can still be that way." She added that being raped by was physically painful, and that the act of intercourse is still painful. While they have been sexually involved, she doesn't feel good about "those things – and I can't." There is limited frequency of sexual involvement relative to many sexually active couples in their age range. She says that each time it is a matter of enduring through the intercourse, because of flashbacks, although she does not share these internal struggles with her boyfriend.

Faith history

Hoping that church might be the answer to helping the girls, influenced the family, Aurora included, to becoming involved with her church and its youth group. However, in the darkness of her junior year, she developed deep questions about God. She says that many of her friends in her youth group didn't understand her questioning her faith. She says that she still wants to "believe that there is out there who loves [her]."

She states, "We have banned () from the role of . Weird; he was not the one who raised me. He was not '!" She asserted that she and her sisters have had a "Heavenly Father" who loved them unconditionally and with whom they would be united, "... at least when they get to Heaven."

Her tattoos of a cross and "Fatherless Generation" speak to her faith journey, which is less active now than a few years ago. Given her history, she says there remain uncertainties about God and his relevance in her life as she moves forward.

Medical history following

Her visits to her primary care physician have been of a routine nature. However, during this evaluation she has reported feeling exhausted and fatigued much of the time, numbness, suffers from early, mid, late insomnia, loss of an appetite, and anxious shakiness (secondary to painful memories and worries).

She also reports being troubled by frequent upset stomach, gastrointestinal attacks of nausea and

vomiting, headaches, in addition to muscle tightness across her chest, neck, and head. She reports vertigo and tinnitus, as well.

Vocational history

Aurora worked full time at a local hardware store from November until January She only left because there was a turnover in management that was more critical of her performance and demoted her. She said she once had a co-worker who touched her and smacked her on the buttocks. She complained to her employer, and the person was terminated.

In January she began working at a local restaurant. She recognizes she needs to look for something else, given her exposure to the public, but lacks the confidence to initiate the interview process. She represents that she feels anxiety in social situations, self-conscious about who may have seen her images and may be looking at her with exposure to her images. She says, "I get anxious in social situations like my current work. Halfway through the shift, I become so anxious, and I never want to stick out my shift to the end." However, she also says that she feels anxious at the prospect of being interviewed and projects others would not view her positively.

Legal history

Aurora denies any arrests or convictions. I have found nothing to indicate otherwise in the records or from the reports of others.

Sequelae from the original series of sexual grooming and assault

Aurora's interview and reports from collateral contacts indicate the following repercussions that are related to the original crimes committed against her between the time span to January

Anger

Aurora still has significant anger at in particular, as well as another abuser. This still remains unresolved by her, although the downloading offenders who have come to her attention have diffused her focus, because she perceives them as the greater, present threat. She feels anger to those whom she feels are violating her privacy, who use images of her abuse as a means of sexual arousal, and possibly use her images to groom other victims. She periodically can be explosive with her anger and can be volatile, much of which appears related to the abuse, the downloading, and the sequelae from the two.

Depressed

Aurora has struggled with depression for many years, the onset of which is difficult to state with precision, though it was likely in early grade school from her report. Later, she said she was fascinated with "stuff that could get you in trouble." She played with fire. She would lie in the street at night. She was caught doing that 3-4 times, and likely did it much more. She also cut herself for a while. She has multiple symptoms consistent with depression, including concentration problems, early, mid, and late insomnia, difficulty experiencing joy and pleasure, fatigue, sad affect, tearfulness, pessimism, hopelessness, anger or irritability, and fluctuations in appetite. All of her testing is consistent with multiple diagnoses that include major depression.

Discomfort with children

Aurora is disillusioned about the prospects of having children, doesn't know how to function around them, and feels guilty although she remains convinced in her position. Children remind her of the child whom she once was and whom she shames. Alice relates this to the effects of her abuse and her own very difficult childhood. She feels insecure around them, as if it highlights her already intense feelings of inadequacy. She freezes when confronted with a child who wants to hug her,

saying that she is not sure what to say or do. She projects that they don't, or won't, like her. This is a tension point for her and her boyfriend, who wants children and has not really come to terms with her not wanting children. Of that tension, Aurora says, "I will never have kids. The person I am with now wants kids. He is so positive. He encourages me that I will be great, and he doesn't fully understand. It is hard; it is always a thing. All my friends have kids, well sort of friends, I don't want to touch kids, or hang out with kids. And people assure me. No one gets it, but they don't understand."

Dissociative responses

Aurora doesn't recall what she did mentally during the years of the abuse. She knows, however, that she shut it out from conscious awareness for several years. She says, "I know there were times when I really was scared, I didn't know why it was happening. She continues to engage in significant dissociative coping mechanisms.

Dissociation is a psychological construct referring to a defense mechanism usually developed in the presence of traumatic experiences that results in a psychological disconnect from the present anxiety-inducing experience, followed by a failure to integrate that experience into one's personal narrative. There is a continuum from mild to severe forms of dissociation. It is considered a severe symptom pattern that is found with the trauma response of survivors who have endured chronic, intense, experiences that are difficult to assimilate or metabolize into one's conscious narrative – since such integration is a stage that is more consistent with acknowledgement and acceptance.

Frightened and "really scared"

Aurora admits to being very frightened during her childhood; "I know there were times when I really was scared, I didn't know why it was happening. I kind of remember other girls my age and I do feel like there were others there."

Grief

She grieves what I did, as well as the loss of a to her, saying, "That sucks that I lost "She says that she sits through many weddings, finding it very difficult to witness. She says she feels "empty" at such times.

Objectified

She was treated as an object or a "thing to be used" by and her other abusers.

Self disgust, self-blame, and guilt

Aurora says, "It is hard, because I don't want to look back at that person (herself as a child). I don't like her. I don't want to be that person: she was weak, vulnerable, stupid, naïve. I don't like her; she makes me mad, because ... because I still think she caused it, though I know she didn't. My head and heart feel two different things. I don't want to be like that. I think of her as weak and helpless. It is crazy that I allowed those things to happen to me. I know what the Bible says." Aurora says that 'little girl' is still shut off from self, has disowned herself, and is locked in bitterness, anger, and self-loathing. She says, "I do want to accept her, and I do want to move on, in a positive way -- not dwell forever on this. I don't want it to happen again, or to anyone else."

Shame and embarrassment

Aurora disclosed her views about herself in this manner, "I always felt embarrassed. I always felt shame. When everything happened, I hated myself. I have his eyes, I have his curly hair. I put the pressure on myself, though I could not have been an adult, but I still blame myself. I still think, "Come on, I should have known better."

Trust damaged severely

Aurora distrusts people, in general, and men, in particular. She doesn't trust people enough to enter

into friendships. She doesn't really desire to have friends, or risk the exposure of being hurt, so her circle of trust is very constricted. She says it is limited to "basically family 24-7," in addition to her boyfriend. Aurora's orientation to trust is very damaged, leaving her with trust as a scarce commodity with only a very limited amount of people who are now allowed within her circle.

Sequelae caused by the awareness that her images of abuse are being viewed and distributed

Aurora's interview and the reports and files indicate that she has been affected by the dawning awareness that images of her and her sister have been, and are continuing to be, distributed and viewed by downloaders throughout the world.

Aurora says, "As a kid, I don't think I appreciated the impact of the images. I know that Mom and didn't let me have a My Space account." However, she tried to get an online presence without their consent, only to be confronted with an older man who started talking online to her. Frightened, she told her mother.

Aurora reports, however, "By my senior year, I understood why they didn't want my images out there. Then an investigator, told us about the letters. Mom had been getting 4-5 letters per week. They waited until I was 18 and told me about the letters. asked if I wanted to receive them. I thought I was done with it! And I guess I will not be. People keep uploading. It brought back depression, I never had thought of it that way. It was hard thinking about it, as I was trying to run away from it, and I can't get away from it.

at least was behind bars. From then on, I had thought it was my own battle, and I didn't know that I would have to continue dealing with it, with people just like my dad. I don't necessarily deal with them, or know anything about them, but I know that they don't know how it affects me. I don't want to have them thinking of me doing things that I didn't want to do.

"It makes me wonder how his (any defendant's) family is dealing with it -- like us? It is causing others the emotional damage that dad did to us. It is still going on."

Aurora describes a variety of feelings related to her awareness that people are downloading images of her abuse. She says she is "angry, grossed out, feels that her privacy is being violated, and feels ashamed, embarrassed."

Aurora also says that the effect of the knowledge of people downloading her images is that she "never feels safe. I don't feel the world is a safe place, at all. That scares me." She adds that her trust, already damaged by "'s betrayal and abuse, has been and is being further injured by the uncertainty of who it is who is downloading these images until they get apprehended. She is left not knowing who it is that may be viewing her images. She worries about how "sick they are," given that she has seen sickness and perversion that knows no moral boundaries, routinely violating those whom they are supposed to love and protect. She is left not knowing, she says, what malignant fantasies, fixations, and intentions any given consumer/holder of her images might entertain.

Specifically, she stated in this evaluation, "I can't believe it is a question about whether people are saying their images don't affect me! How could it not affect me? I am being violated. I didn't put pictures out there. It makes me mad! It irritates me! I have so many emotions, but mainly I am angry!

"If I were to be standing in front of them, they would want to touch me. The image of them seeing me and fantasizing about me, and wanting me. No one should have done it or seen anything. To think I don't even know who it might be! It makes my stomach turn. Makes me feel like a sociopath. How can they not see how this is a violation of my sister and me? That makes me sick too!"

Aurora has experienced, she says, directly and through knowledge of "The Club," the dangerousness, self-centeredness, and destructiveness of such individuals. She has experienced firsthand the widespread and pervasive threat such individuals have posed to her, her sister, and other children. She represents that she knows firsthand that persons who are sexually addicted to seeing the images of children being abused are very capable of traveling small or great distances to the location of the victim to pursue their fantasies. For her, that was her reality, not a theoretical speculation.

In other words, and though she doesn't compare her plight to other such survivors, all of whom she identifies with, she and Alice think they have a basis for their anxiety, fear, apprehension, and hypervigilance about the risks and reminders to which they remain exposed.

For example, Aurora says that she has had a "constant fear, an overwhelming feeling, an uneasy feeling – that it will never go away – though it does feel good that they are being arrested." She adds that she feels as if she must "always be on [her] guard. Knowing the pictures are *out there*, it is hard meeting new people. What have they done? What life have they lived?"

She and her sister also independently expressed concern that their pictures are being used by possessors of their images to groom other children with the normalization of sexual activity being done by adults to, or with, children. That thought is very distressing to her and to Alice.

Aurora says that had she known about the scope of the distribution of her images, she believes she might not have not moved out or gotten a job with the public. She applies this to her apartment complex, public transportation, or customers she serves at the restaurant.

She explained her statement, saying that at college, she was dealing with many people, without knowing if someone she was talking to might be masturbating to her images or who might be thinking of sexual acts with her. Referring to her extremely poor involvement in, and attendance at, college, she mentioned the impact of knowing there are downloaders of her image out there somewhere. She explained her thinking, "It is not safe that I didn't know (who has or is obsessed with her image? Especially in college I felt really uncomfortable. I never went to class and I flunked out. Men were trying to hit on me. It was a very uncomfortable setting. She added, "Even guys on campus who did not hit on me made me feel very uncomfortable.

"Since I was told at 18, I have always had in the back of my mind, I have always thought there are guys or maybe even women, who have seen my images. Why are so many people saying to us that we look familiar? My sister and I immediately go to that [worry about this person having viewed their images]. This town is very small. If someone sees me pose in a picture [online], my features have not massively changed, so I am very recognizable, it freaks me out, it makes me feel so sick. How is it that people still want it? It is frustrating and embarrassing to think that I am still out there, and I will always still be out there." She adds that she worries that the consumers of those images will interpret the behavior depicted as being reflective what she likes and who she really is. That thought is both terrifying and distressing to Aurora.

Aurora added, "I have worried about someone looking for me," I had one dream where I was at a coffee shop, and this guy was looking at me. Then the dream jumps to me being at home, and then he is looking at me, and another scene where I didn't know where I was and he was trying to rape me. I was 18 when I had the dream. It felt real and it is scary to think it could be possible."

Aurora states that the discovery about the downloaders of her images has noticeably added to her distrust, as well. Having seen her father, and then his confederates, brought to justice, there was

some reality to the conclusion of external threat by her abusers. However, the discovery of the existence of the downloaders has definitely compounded her issues with distrust and suspicion in general, and men, in particular. This has created a ubiquitous source of stress and potential threat that she says she cannot put to rest.

She has general distrust of men, and she is triggered by something as ostensibly innocuous as a man looking at her. Her default perspective takes her immediately to the belief that men are "perverted." That expansion of perceived threat from a now convicted set of pedophiles to a much more extensive number of males who might be anywhere has led her to be wary of the vast majority of males. She says that it is her belief that if someone is looking at her, she labels them as perverted and someone who very possibly has viewed her images.

Aurora says that there was many things she would have liked to do in recent years, but the knowledge there are a number of individuals secretly viewing her is shameful and poses a significant threat to her, from her – and her sister's – perspective. Knowledge of the named, and the unnamed viewers of her images has had the effect of shackling her to fear of the unknown. The impact of the number of downloader notifications, she says, has triggered for her a significant escalation in her avoidance strategy. The threat this poses to her, from her perspective, has been sufficient to elicit a withdrawal or avoidance pattern that effectively holds her back "a lot." She added, "There are so many things I would love to do, but I would not do it. I would absolutely hate being famous. I think if I could write a book about my story... but, I don't want to tell it myself."

Current mental health involvement

Aside from the counseling with Dr. 2014, when she began therapy with

Aurora did not participate in further therapy until fall of Ph.D.

Aurora says that she has suffered from "really bad anxiety [her] whole life." She says that she has a constant knot in her stomach. Most days, she is anxious, feeling a sense of foreboding that something is going to happen to her. She described it as a sense of non-specific dread or fearfulness, and that she has not been able to really relax. She says she tries to calm herself by talking to herself and taking some deep breaths. She says that Alice has anxiety as well. Looking ahead to another day "freaks [her] out," she says, adding, "I feel afraid. I feel like I have always had that feeling."

She also describes constantly worrying about many things, such as whether to return to school or not, or when meeting someone new. Aurora adds, "I have the worst night's sleep. Sometimes if I am high enough with marijuana, I do feel refreshed. If I don't, then I am restless." She reports that it is not unusual that she may not fall asleep on occasion until 2:00-3:00 AM. And, it is not unusual that she awakens as early as 4:00 -5:00 A. M.

PSYCHOLOGICAL TESTING

Aurora was administered five psychological tests in order to increase the database upon which conclusions in this evaluation were made. (NOTE: The interpretations based on the MMPI-2 and the MCMI-III are hypotheses informed by general research studies and normative data, and should not be used in isolation from other information regarding Aurora and the context of her life circumstances. The interpretive statements are primarily computer-generated, actuarial and expert predictions based on the test patterns. Interpretations reflect characteristics of persons who have provided test response patterns that are similar to those of Aurora. Test results are probabilistic in nature and should be interpreted cautiously. It is impossible to tell, from test results alone, if these patterns and deficits pre-existed the events in question or are the sequelae of the events. Therefore, the reader should examine the test interpretations for general trends and put limited weight on any one specific statement. In the integration and presentation of the test data, where

results were unclear or in conflict, I selected the most likely hypotheses for presentation here.)

Aurora completed the Minnesota Multiphasic Personality Inventory-2. This is a standardized personality test composed of 567 items that compares her response patterns to those of various normative clinical and non-clinical populations. Her profile should be interpreted in the light of someone reporting an unusual number of psychological symptoms. When considering potential explanations for her endorsement of a large number of symptoms, her historical and contemporary life challenges, interview findings, and other test results indicate, in my professional opinion, that the explanation of best fit for Aurora's profile is that this profile is a valid representation of the current state of her psychological functioning. She is in a state of chronic high-level stress and feels overwhelmed with regard to the demands she is facing.

Such persons suffer from a pattern of chronic psychological maladjustment. Such individuals are overwhelmed by anxiety, tension, and depression. Persons who respond in this manner feel helpless, inadequate, insecure, tend to think nothing is working out right, and view life as hopeless. Such individuals have difficulty concentrating and making decisions. People with this type of profile typically live a rather disorganized and pervasively unhappy existence, with episodic spikes of more intense emotions and disturbed behavior typically related to stress levels that are activated at lower thresholds than people who have not been through similar circumstances.

Individuals such as Aurora function at a very low level of efficiency, and are susceptible to emotional and behavioral deterioration with stressors that many others without her history might consider minor. Such persons feel very vulnerable and exposed, have low self-esteem, underdeveloped resiliency and adaptability. Consistent with her history, persons such as Aurora have a history of poor work and educational achievement.

Although she appears to be prone to convert stress into physical symptoms, and though she is inclined to avoid introspection and internal exploration, she still experiences clinically significant levels of depression, along with guilt, unworthiness, self-condemnation, feeling she deserves to be punished, hopelessness, regrets and unhappiness about her life, and feelings of inadequacy. Such individuals tend to view life as no longer worthwhile and feel as if they are losing control of their thought processes.

Her response content is consistent with someone who has seriously contemplated suicide. She tends to be obsessional in her worries and clearly feels estranged and isolated from others. She is suspicious of others. She deals with considerable anger, some of which is directed to others, and appears to have a high potential for explosive outbursts, at times. Furthermore, Aurora's responses are consistent with someone who is rather high-strung, easily overwhelmed, and feels things more intensely than do others.

The world to Aurora, based on her response pattern, appears to be a threatening place. She feels as if she has generally gotten an unfair start to life. She often feels misunderstood and lonely, in that context.

Nonetheless, Aurora subscribed to a belief that she has a special mission in life, a belief that interview data suggests are more linked to the need to speak up for herself, and in doing so, helping other victims of similar experiences. While this profile might be found in someone who is psychotic, interview information and the report of others rather supports the conclusion, in my professional opinion, that she deeply feels different, alienated from others, fearful of external pervasive threats to her safety, in addition to thoughts and feelings that feel overwhelming and out of control to her.

Her item response pattern indicates problematic interpersonal relationships. She has limited basic

social skills, is behaviorally withdrawn, and introverted. Many with such a profile never establish fully trusting, lasting, intimate relationships. Social situations are very anxiety inducing for her, and meeting others is very difficult. Hence, she is likely to be very uneasy, rigid, and over-controlled or stiff in social situations. She prefers a more introverted, reclusive lifestyle with avoidance of interpersonal situations, as much as possible.

A review of sub-scales and critical items reflects low ego strength, low dominance, high levels of subjective depression, mental dullness, brooding rumination, low motivation or drive, general malaise, significant sleep problems, gastrointestinal symptoms and neurological concerns, hypervigilance and susceptibility to the views or attitudes of others towards her, feelings of persecution or threat form others, intense social alienation, a strong sense of lacking mastery over her thoughts and her feelings, generalized fearfulness, impatience, self-doubt, significant sexual concerns, and marginal treatment motivation.

She acknowledges minimal past use of alcohol, although she admits to use of marijuana for calming her anxiety or attempts to help her sleep. She has a clinically elevated Posttraumatic Stress scale score. Such persons are often found to have an Anxiety and Major Depressive Disorder, and Schizoid Personality-like features.

With regard to treatment indications, persons with such a profile often are prescribed psychotropic medications for their depression and anxiety, in addition to a need for intensive therapy. With so many psychological challenges and situational concerns, it may be challenging to maintain focus, and consideration should be given to a rather intensive treatment regimen of multiple sessions weekly in the initial stage of therapy. The results also support the conclusion she will require a great deal of emotional support, balanced with a discerning therapeutic recognition that avoidance of anxiety-inducing situations adds to her problems in the long run. Third Wave therapies such as Acceptance and Commitment Therapy (ACT) and Dialectical Behavioral Therapy (DBT) may help structure her therapy and yield more profitable results than unstructured, insight-oriented approaches. Coping strategies with regard to PTSD sequelae are also indicated for this survivor of past and present trauma-inducing experiences.

Aurora completed the Millon Clinical Multiaxial Inventory-III. This is a personality test for those who are in early phases of assessment or treatment. Consistent with the MMPI-2 findings, when considering her history, level of symptoms, and effectively unexamined trauma exposure, the explanation of best fit for Aurora's profile is to view her responses in light of feelings of extreme vulnerability associated with current turmoil in her life. Such persons view self and others from a perspective of feeling inadequate and overwhelmed. From that perspective, there may be some symptom amplification, fueled by an anxiety-disordered process known as "awfulizing" or "catastrophizing."

Such persons have not been able to master an adequate sense of internal cohesion and core sense of self. She has an underdeveloped set of coping mechanisms to deal with life challenges that, hence, are overwhelming to her.

Notably, the profile is consistent with an intense mistrust of others, morose sadness, and withdrawal from social relationships. While desiring closeness and affection, she remains guarded and defended in many respects. She avoids as much exposure to commitments and outside involvement as she can get by with, because she views others and the world, in general, as a threat. She anticipates rejection from others, and her distancing behavior and social guardedness behavior may elicit social rebuff.

The MCMI-III is consistent in identifying a self-deprecating attitude, a general avoidance of

autonomous behavior, passivity, and withdrawal into a meaningless, ineffectual, idle life pattern. Her self-image reflects vulnerability, weakness, and lack of confidence.

Again, depression with agitation, anxiety, gastrointestinal discomfort, agitation, a quixotic mixture of happy-go-lucky pseudo-optimism overlaid over depression and hopelessness, and trauma-related disorders are indicated in the profile. With her depression and sense of hopelessness, she has had suicidal thoughts and admits to a suicidal attempt. From that standpoint alone, her involvement in therapy is very appropriate. She also acknowledges some eating disordered behavior and thought patterns.

Aurora completed the Trauma Symptom Inventory-II. This inventory is a 136-item test exploring the presence of symptoms consistent with posttraumatic stress and other psychological sequelae of traumatic events that have been experienced in the past six months by the examinee. Like her sister, her atypical response score is elevated beyond the recommended cutoff score, which can reflect generalized over endorsement of the items, specific over endorsement of the PTSD items, random responding, or very high levels of distress.

As noted earlier, based upon her life history that is self-reported, confirmed by significant others, and documented in available academic records, the interpretation of best fit for her response pattern is the latter: very high levels of distress. As the test authors indicate in the manual, "Some individuals with substantial child abuse or trauma histories have elevated scores on infrequency or 'fake bad' scales as a result of the atypical or extensive symptomatology sometimes associated with posttraumatic disturbance.... Such a score does not support specific conclusions as to whether unusually high item response rates are due to malingering, a 'cry for help,' random responding, or some other factor. Further, an invalid ATR score should not be interpreted as information on whether the respondent has or has not been traumatized or whether he or she is suffering major posttraumatic symptoms." (Traumatic Symptom Inventory-2; Professional Manual, J. Briere, p. 14).

Critical items flagged for concern include her responses to a prior attempt of suicide, trying to kill herself but then changing her mind, intentionally hurting herself, thoughts or fantasies about hurting someone, and doing something violent because you were so upset.

Because of the high level of responses, the analysis of the subscale patterns does not yield much differential specificity about more severe symptom clusters relative to those less severe. Clearly, her TSI-2 results again underscore how generally overwhelmed she is with anxiety, anger, emotional distress, depressive symptoms, PTSD-related symptoms, somatic expression of psychological distress, and dissociative-type responses. This portrays someone who is beleaguered with distressing psychological symptoms, has little resiliency at this time, is barely holding it together, has seriously struggled with suicidal thoughts and even attempted acting in self-injurious ways, coping poorly with life stressors. It should be noted that her consistent endorsement of chronic sleep disturbance is often associated with significant psychological problems and should be addressed early in treatment.

Aurora also completed the PTSD Screening and Diagnostic Scale (PSDS that assesses the six criteria of DSM-IV for making a diagnosis of PTSD). This test instructs the respondent to describe the incident to which the answers on the PSDS are referring. In this case, Aurora indicated "Impact of knowledge of my images being distributed/viewed/traded on internet."

Her responses are consistent with someone who meets each of the criteria for Posttraumatic Stress Disorder, chronic, severe. Her responses also reflect her belief that the consequences of the knowledge of the downloaders' actions have resulted in "considerable" or extreme/severe" adverse effects on multiple life domains, including distress levels, social life, her intimate relationship, her

ability to work, enjoyment of leisure time and recreation, physical symptoms, overall ability to function, and overall life satisfaction.

She completed the Detailed Assessment of Posttraumatic Stress (DAPS), as well. This is a 104-item assessment also purporting to assess the degree to which symptoms of PTSD are present with an individual, the degree to which the respondent over or under responds to the items with regard to test-taking styles. The normative samples include 433 subjects from the general population who have experienced at least one trauma, as well as two other population samples. It has good sensitivity and specificity when compared to the CAPS, which is a well-regarded, standardized assessment of persons reporting to have been sexually abused. The test assesses the number of lifetime trauma exposures, generally, and then asks the respondent to identify which specific event the respondent is referring to in answering the 5-point responses to approximately 93 PTSD-related questions.

Aurora's results are consistent with the other psychometric findings presented in this report. Her profile is valid, supporting the conclusion that she did not respond to the test items with a negative or positive bias. That said, her responses indicate severe clinical levels of symptoms related to PTSD of re-experiencing, avoidance, psychophysiological arousal, impairment, dissociation, and substance use to mood alter. Her suicidal scale elevation is lower, relative to the other scale severities, but clinically concerning, nonetheless, underscoring the importance of addressing that issue in her therapy.

SUMMARY AND CONCLUSIONS

Summary

Stated to a reasonable degree of psychological probability, the clinical interviews, psychological testing, collateral interviews, and review of records support the following summary with regard to Aurora, in my professional opinion.

- The first few years of her personal development and family life appeared to be a "good enough" environment within which children could be raised by stable, bonded, and loving parents. As with her sister, those constitute her earliest memories.
- Their mother's involvement with family illnesses and crises resulted in her increasingly being drawn to

 This increased the time that the four children were left their father's care.
- However, in , his injuries related to a MVA resulted in changes in his spending more time at home, drinking more, and becoming obsessed with photographing children, both his own and others.
- However, by the time she was approximately four years old, a very malignant influence
 entered her and Alice's lives when her father began engaging in grooming behavior that led
 to severe, chronic sexual abuse being perpetrated on them for about 3-4 years. By nature of
 her personality, Aurora was more compliant and sought to be a pleaser, compared to her
 sister who was more of a fighter and more defiant.
- The nature of the abuse perpetrated on one or both of them included the following:
 - He awakened Alice and her sister at night by touching their genitals or by the flash of his camera, while they were sleeping. He chastened and berated them for wetting the bed, a symptom for which he was likely responsible.

- He did this under the pretense of their bedwetting, which likely was related to the sexual abuse.
- He would hit them with a belt sometimes, spanking them on their "bare bottoms."
- He would make Aurora and her sister pose for him dressed in swimsuits, hula skirts, coconut bras, or in the nude. The scenes included still shots or scripted actions like wrestling with each other, standing naked back to back, licking ice cream cones, or lollipops.
- He caused her to engage in scripted activities of a sexual nature, including making certain facial expressions, sounds, use of various objects, or acting out with Alice.
- He caused Alice and Aurora to touch one another's genitalia and engage in oralgenital contact with each other's "private parts."
- He made her lie naked beside her father in bed.
- He caused Aurora to engage in sexually suggestive acts with stuffed animals,
- He made Alice lie on a floral couch with her diaper off, while he took a picture of her in the nude.
- He told them that the physical activities to which she was being exposed were normal, but to be kept a secret.
- He restrained Alice, and possibly Aurora, in his lap while he was touching and rubbing her crotch through her clothing.
- He introduced her to the act of masturbation and caused her to masturbate herself in his presence.
- He caused her to touch his genitals, as well as touching her genitals.
- He digitally penetrated Alice's, and possibly Aurora's, vagina. He also allowed at minimum, his confederate, to do the same.
- He treated her as an object or thing to be manipulated for his own purposes, regardless of the impact on her or others whom he involved.
- He caused them to engage in sexual activities with other men, and making images of her with them while they did so.
- He raped Aurora vaginally. Alice does not have a recollection of being raped, though that does not mean he did not.
- He caused her to engage in scripted sexual activities with others in addition to her sister.
- He took pictures of Alice and Aurora in naturalistic and staged settings, and took pictures multiple times while bathing, or having them bathed by their older sister

- Concurrently, during the years of abuse, Aurora struggled psychologically, educationally, and socially. She was chronically sleep deprived because of his nighttime visits and the victimization in her parallel private universe. Concentration and focus at school were impaired; she chronically daydreamed. This type of cognitive interference substantially undermined her ability to perform to her potential, adding another layer of shame and inadequacy to her view of self. Aurora was chronically fearful and anxious.
- January represented a watershed event when Aurora and Alice's private torment was turned public in an extreme way for which they, as well as the rest of the family, were completely unprepared.
- Their father and his confederates were ultimately sentenced to lengthy terms.
- However, the relentless notoriety of the media exposure during the drawn out proceedings
 constituted the onset of another trauma, the magnitude of which was extreme. It had many
 repercussions and, by all accounts, was ferocious in its invasiveness. Aurora, Alice, and
 their family were harassed at their home, harassed and bullied at school, and they felt there
 was literally no safe place for them outside of the interior of their besieged home.
- The community response compounded Alice and Aurora's anxiety, shame, victimization, and
 powerlessness. Their lives, in many respects, were no longer their own. It was for Aurora, for
 Alice, and for each of their family members an overwhelming ordeal, concurrent with the
 added pressure of their father's family, and with being thrust into poverty.
- The local media frenzy focusing on their father, the "Club," and their family was invasive and intense. Many in their community became aware of Aurora and Alice's victimization and their father's having created and exchanged images of their abuse with others. This also filtered into the rumor mill of many in their schools, as well. Even the non-abused brother, was harassed and beat up on one occasion.
- For both girls, this resulted in turmoil at home, financial upheaval, and a tug-of-war within the
 extended family on their father's side and their own family. From the internal devastation,
 they describe external devastation that then ensued for them and their loved ones.
- However, for Aurora, less the fighter and more the pleaser than her sister, she felt confused
 and ambivalent feelings of relief, guilt, grief, and sadness, shame, embarrassment, anger,
 and anxiety. Her internal turmoil and darkness appears to have been related to the onset of
 her nightmares.
- Aurora was very conscious of the degree to which others knew of their abuse, their family
 problems, the events surrounding the high-profile case, and projected that others looked at
 her and her sister with contempt.
- Academically, she has struggled since starting school with symptoms of concentration, distraction, inattentiveness, and these difficulties have added to her inadequate, selfdeprecatory view of herself, as well.
- Her struggle with school also paralleled her difficulties in interpersonal relationships, as she
 viewed herself as a "loser" and "stupid," which influenced her choice of friends.

- Aurora lacked fundamental confidence in her ability to function adequately at school and, later, in the workplace, adding to her lack of self-efficacy.
- She did not fall into the serious use of extensive polysubstance abuse, although she began treating herself with marijuana to manage anxiety and problems sleeping.
- She has involved herself with primarily one boyfriend with whom she has been in relationship since ninth grade. She feels safe with him and his family and is in a codependent relationship with him up to this time, with no changes foreseen in the future.
- Aurora had developed during the abuse years a survival mechanism of dissociation, derealization, and depersonalization, resulting in a process that impairs her ability to stay "present" and focused, undermining her functioning in all settings.
- She struggled with anger, fatalism, anomie, profound depression, in addition to serious and persistent suicidal ideation and self-harm actions. Some of her behavior could have led to her death. Her sense of ennui placed her in a dark, lonely, and despairing place.
- Aurora has continued to be troubled by low self-esteem, shame, and guilt for her past. The
 actions of and other members of "The Club" seriously damaged her trust in others,
 in general, and in men, in particular.
- Apparently, as an adolescent until she turned 18 years old, Aurora was essentially protected from the knowledge of the Internet activity that her mother had known about as her guardian. Her mother had been the recipient of notifications when Aurora was a minor.
- At the point she turned 18 years old, she was shortly thereafter informed by the family contact with NCMEC and, like her mother, elected to receive the notices.
- Aurora became aware of the activity regarding the trafficking of her and her sister's images.
- Given her prior abuse by multiple individuals, including , she has represented that the knowledge that multiple individuals have been and will continue to use the abuse images for sexual arousal has been very distressing and depressing.
- Her discovery of the ongoing involvement with the images of her abuse by multiple
 individuals intensified substantially pre-existing problems, and reopened Pandora's Box of
 malignant individuals who she fears may stalk her and her sister, with the intent to do harm.
 She feels violated, fearful, and angry. Any fragile sense of safety that was rebuilding has
 been destroyed. Her knowledge of the activity of these individuals has resulted in a fear that
 is ever present for her.
- This knowledge has also had a debilitating effect on her attitude and willingness to be exposed in public places, such as schools or the workplace.
- Having been previously egregiously violated and objectified, she experiences intrusive
 thoughts and sensations about any one of the downloaders desiring to touch her in ways
 similar to her original abusers. She extrapolates and projects her own firsthand experience
 with pedophilic rapists onto those who have downloaded her images, populating her
 thoughts with images of what any one of them might want to do to her. Her fear and distrust

of men has been fueled and aggravated over what it was before her knowledge about the downloading activities.

- She has returned to therapy this fall , because the Victims of Crime have agreed to pay for the therapy.
- Her psychological testing is consistent in confirming that Aurora is overwhelmed in her ability
 to cope with the demands with which she is confronted. The interpretation of "best fit" is that
 her test taking results are valid and not consistent with malingering or an attempt to "fake
 bad."
- She is not doing well with regard to her psychological functioning, her vocational involvement, and post high school educational pursuits.

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296.33	Major Depressive Disorder, Recurrent Episode, Severe
300.23	Social Anxiety Disorder
309.81	Posttraumatic Stress Disorder with Dissociative Symptoms
300.82	Unspecified Somatic Symptom and Related Disorder
301.82	Avoidant Personality Disorder (Criteria 1, 2, 4, 5, 6, 7)
301.89	Other Specified Personality Disorder with Schizoid (Criteria 4, 5), Dependent (criteria
	1, 2, 4, 6), and Borderline (criteria 3, 6, 7, 8) features
V15.41	Personal history of sexual abuse in childhood
V62.89	Victim of Crime: childhood sexual abuse and ongoing victim of images of her childhood sexual abuse being distributed, downloaded, and viewed online
314.00	Attention-Deficit/Hyperactivity Disorder, Predominately Inattentive Presentation (Rule Out)
305.20	Cannabis Use Disorder, Mild (Rule Out)
V62.3	Educational Problem
V62.29	Other problems Related to Employment

Conclusions

1. In my professional opinion, the interview of Aurora, collateral interviews, psychological testing, and the review of available records form the basis for the following conclusions regarding the referral questions, stated to a degree of reasonable psychological probability. The following opinions and recommendations are based on available information and, should additional information become available, are subject to revision.

The available information indicates that Aurora carried a host of challenges resulting from the multiple tragedies of her betrayal from her father, the chronic, severe childhood sexual abuse caused by him and multiple other perpetrators, and the exposure of her and Alice's lives throughout their known world, including their fellow students.

All of the Posttraumatic Stress Disorder symptom clusters were present in Aurora, including intrusive re-experiencing of the trauma, avoidance and numbing, and physiological reactivity and hyperarousal. In addition, there were other implications arising from those traumas that are not adequately captured by the <u>DSM-5</u> diagnosis of PTSD. For this, the conceptualization of complex PTSD (a non-<u>DSM-5</u> concept) takes into account chronic exposure to multiple traumas by caregivers and its influence on child development.

Aurora met the criteria for a complex posttraumatic presentation. This included psychological fragmentation (loss of a coherent sense of self), and a set of shattered assumptions related to a loss

of a sense of safety, trust in self and in others, and self-worth. Repeated traumatization during childhood can result in problems with the following, and has in Aurora's life, as well as her sister's:

- Attachment problems: including boundaries, trust issues, social isolation, and impaired emotional attunement);
- Biological dysregulation, including somatization;
- Affective or emotional regulation problems: difficulty modulating intense emotions, difficulty
 with the identification of emotions besides anger and with affect expression, along with
 difficulty expressing needs, preferences and wants in a healthy manner;
- Dissociation: including depersonalization, daydreaming, difficulties integrating painful life experiences into one's cohesive life narrative, and memory difficulties, and challenges remaining "present" in the moment;
- Cognition: including, challenges regulating attention, development of pre-frontal cortical functions including the higher executive functions such as visualizing, planning, mindfulness, judgment, resourcefulness, initiation, and problem solving;
- Self-concept: including lack of a cohesive, integrated, sense of self. Co-occurring self-concept issues include poor self-esteem, shame, guilt, and disrupted sense of self-ascontext.

Aurora also appears to have significant anxiety disordered problems with aspects of Social Anxiety related to her early traumas. The PTSD-related functions of fear, catastrophic thinking, in addition to feelings of inadequacy and insecurity, are mixed in with that.

Also related to the original abuse is depression that is chronic and related to the low self-esteem and pessimism about one's future, along with chronic unhappiness and sadness that was never far removed from being accessed.

2. Stated to a reasonable degree of psychological probability, Aurora's interview, collateral interviews, and files indicate that she has been psychologically injured by the dawning awareness that images of her and Alice have been, and are continuing to be, distributed and viewed by downloaders throughout the world.

Even if Aurora was aware that pictures were taken, she was unaware, and could not comprehend at the time, how the images were being used and disseminated, or the implications for the future that are associated with that. This is, in part, due to her developmental capacity at that age, and, in part, due to overwhelming immediate psychological challenges for survival with which she was dealing. So it is typically not until adulthood that the survivor of abuse and image distribution begins to abstract and comprehend the potential implications and confront the real and imagined dangers and risks inherent in the situation. This happened for her around the time she turned 18 and was informed about the existence and proliferation of their images on the Internet, and the arrests and convictions of a number of individuals possessing those images.

It appears that only as Aurora entered into her later teens or into early adulthood that she became aware of the dissemination of those images depicting their shaming, painful, and frightening abuse experiences, memorialized in perpetuity. To the four persons whom I have now evaluated who are in this type of dual traumatization, this realization is uniformly destabilizing, anxiety and fear inducing to an extreme degree — sometimes beyond the ability of others to comprehend.

It does appear to the victim/survivor such as Aurora or Alice that the core pedophilic perpetrators from the original abuse have multiplied into many. Given Aurora's experience of what her or Alice's abusers were capable of, realizing there are multiple other persons possessing those same crime images involving her at the worst, darkest time of her life is threatening and revivifies the risk once again from many more pedophiles. This, in turn, continues to trigger PTSD-like symptom reaction.

Furthermore, as is the case for Aurora and her sister, the psychological threat load arising from the knowledge of each additional downloading/distributing offender falls upon an individual who is already compromised and extremely vulnerable, lacking adequate psychological resources to bring to bear on this potential threat to them. In none of the four survivors has there been a strong, internally cohesive sense of self who is able to dismiss the threat posed to them by the individual and aggregate impact of these offenders.

However, unique to the cases involving Aurora and Alice, based upon my experience in this area, is the added trauma of what I have referred to as the second of three waves of trauma: the public notoriety of the case in their local community and beyond. Of the cases I have evaluated, these two were exposed to a frenzy of media coverage that stripped away their privacy when they had not even been the ones to disclose the abuse.

There is abundant evidence to indicate, in my professional opinion, that Aurora and Alice were significantly and adversely affected by the invasive media coverage that spread to the awareness of their community and to a number of their student peer group. This exposure added to the shame and self-consciousness, and in many respects, interfered with a therapeutic, private environment in which they could attempt to heal.

In that context, Aurora and Alice had already become sensitized and hypervigilant to the implications of indiscriminate exposure to others who knew about the case, their family, and them. Then, roughly six years later, thinking the threat was only historical, they were informed of the activity level of downloaders and distributors. This had the effect of making the unsafe, threatening, and invasive world substantially more dangerous, threatening, and deprayed.

In each of the two other cases of dual traumas of abuse and internet distribution, the parent/perpetrator was eventually arrested, pleaded guilty, and had been incarcerated for many years. As difficult and destructive as the original abuse was, in each evaluation, the appearance of one offender after another who is still downloading and/or distributing images effectively constitutes a trigger that reactivates the past and interjects the past into their present — and indefinitely into the future. This creates a constant stream of frightening, potentially threatening, malignant intrusions into their current world. This is true for Aurora and for Alice.

In the field of traumatology, it is understood and widely accepted that the development of PTSD after an initial traumatic event may be one of the strongest risk factors for exposure to subsequent trauma, and the primary risk factor for experiencing re-traumatization following a subsequent trauma. In other words, persons such as Aurora or her sister carry a vulnerability to be further traumatized when exposed to a further traumatic event, such as the awareness of a stressor like the knowledge of the existence of the downloaders and distribution of their images.

Therefore, when subsequent persons commit a crime against a previously traumatized victim/survivor, they have selected someone already at heightened susceptibility to further, qualitatively different injury. The phenomenon of re-traumatization appears to be very important in shaping how people respond to trauma. This is thought to be partly related to neurobiological as well as psychobiological consequences that render a person susceptible to greater injury when exposed

to future trauma.

The criminal action of each downloader, representative of the group of downloaders to Aurora, has effectively re-traumatized her each time notice is received. While she has delegated Ms. Hepburn to buffer her from weekly notifications from NCMEC, she still is affected by her knowledge of the existence, activity, and threat appraisal with which she deals.

These actions have caused psychological injuries, apart from the original injury from the abuse, the results of which have a permanent impact, stated to a degree of reasonable psychological probability. These injuries are clinically significant and have been specifically identified in this report. They include, but are not limited to posttraumatic stress symptoms, including reactivation of reminders of her trauma, nightmares, avoidance patterns, fear, anger, depression, a variety of anxiety symptoms, relational distress, and aggravated sleep disturbances.

Because of the indefinite presence of the images online, the inability to remove them, and the multiple individuals already apprehended and adjudicated, she has been conditioned to expect that they will never go away and never stop presenting a threat to her, not knowing who, when, or how the threat will present itself. Stated to a reasonable degree of psychological probability, these psychological injuries are permanent.

As traumatic as the notification of the apprehension and adjudication of each offender is, it also appears to provide Aurora with a sense of trying to gain some control when she has chronically felt powerless. Being more passive than her sister, Aurora would likely not have taken the action to contact an attorney, had Alice not pursued it. Instead, she would have likely continued to store up the weekly NCMEC notifications, as her mother had done for years.

However, Aurora has come to recognize the wisdom of relying upon her attorney and the rule of law in order to seek restitution for her injuries. Therefore, it is my conclusion that Aurora is choosing to do so as part of a restorative, reparative restitution to make a statement to offenders, to take a stand, to be strong when she feels weak and vulnerable, and to obtain resources to help her afford to receive the services necessary to give her any hope of salvaging a life that has meaning and purpose.

Recommendations and cost estimates for treatment

On the basis of the clinical interview, collateral contacts, available records, and psychological testing in this evaluation, I recommend that Aurora continue to pursue the psychotherapy she has just begun. Based upon a reasonable degree of psychological probability, it is my professional opinion that the cumulative psychological injuries related to the downloading and/or distribution of the images of her being abused are severe and permanent.

The focus needs to be based upon the issues identified in this report, including the following:

- 1. Remediation of sleep disturbances and develop restorative sleep patterns, including a reduction or elimination of the use of marijuana as a self-medicating and avoidance strategy.
- 2. Processing life story to develop insight and understanding of the impact of the past and present trauma-related stressors on her life.
- 3. PTSD symptom remediation or reduction, including an understanding of the role of avoidance in maintaining unhealthy coping strategies.
- 4. Participate in some therapy, as indicated, with her sister to help them collectively learn how to metabolize and process their common challenges, harnessing the mutual strengths rather than each individually dealing with her issues.
- 5. Participate in some therapy, as indicated, with her core family members, processing collectively what they have survived, identifying what behaviors are desirable to encourage

healing and healthy individuation, rather that unhealthy codependency and boundary enmeshment

- 6. Develop healthy, safe coping skills to deal in as healthy a manner as possible in a world in which there are abusers, downloaders, and distributors of her images online.
- 7. Learn how to be appropriately courageous and assertive, rather than fear-based and avoidant, and developing an approach rather than avoidant behavior pattern.
- 8. Grieve the losses in her life.
- 9. Developing healthy cognitive-based strategies by use of Dialectical Behavioral Therapy and Acceptance and Commitment Therapy.
- 10. Reduce shame and guilt while concurrently building self-respect.
- 11. Develop an ability to implement independent living.
- 12. Develop healthy boundaries.
- 13. Develop greater capacity to trust and become vulnerable in the context of a trustworthy, respectful relationship.
- 14. Develop an ability to focus and concentrate at school/work.
- 15. Develop an ability to attend school and to work productively with minimal debilitating anxiety.
- 16. Participate, as indicated, in relational counseling.
- 17. Address the substantial sexual issues with which she struggles.

Accordingly, I recommend the following remediation for Aurora. Please note that these recommendations are similar to those I have made for her sister. The similarity is their general treatment issues and needs justify, in my professional opinion, a treatment delivery platform that is comparable in the broad context, but will be tailored to the unique challenges each faces within the recommended treatment modalities. Additionally, the recommendation contains significant latitude within the proffered ranges of treatment sessions, allowing for clinically appropriate therapeutic interventions tailored to the needs of each.

Psychiatric Intervention for psychotropic medication assessment and treatment:

Psychiatric evaluation for medication

If medications are prescribed, monthly med review appts.

If medications are prescribed, bi-monthly med, review appts.

If medications are prescribed, quarterly med review appts. for possibly 20 – 30 years

2. Individual psychotherapy:

- Twice weekly appointments @ \$175/session for 5 7 years: \$87,500 \$122,500
- Weekly appointments @ \$175/session for 5 7 years: \$43,750 61,250
- Every other week appointments @\$175/session for 5 7 years: \$21,875 30,625

3. Relationship therapy:

 Lifetime total related to family of origin and/or significant adult relationship issues related to the impact of the image dissemination and downloaders: 75 -150 sessions
 \$200/session: \$15,000 - \$30,000

4. Life coach:

- Weekly sessions @ \$130/session for 3 5 years: \$19,500 32,500
- 5. Total estimated costs: \$209,925 \$304,275

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RANDALL L. GREEN, PhD Aurora Page 32

Please do not hesitate to contact me in the event that you have questions or clarification about the contents, conclusions, and recommendations contained herein. My conclusions are based upon the body of information available to me as of the completion of this report. I reserve the right to revise any portions of this forensic evaluation in the event that additional materials are provided that might affect the conclusions that I have reached.

Respectfully submitted,

Randall L. Green, Ph.D. Clinical Psychologist